Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level	produced by rate revision effective	4-1-15
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private Passenger Commercial		
 Automobile Physical Damage Private Passenger Commercial 		
Liability Other Than Auto		
4. Burglary and Theft	\$100,755	-12.3%
5. Glass		
6. Fidelity		
7. Surety		
Boiler and Machinery		
O. Eino		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	. <u></u>	
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain territory (terr	itories) or certain classes? If so, specif	y: <u>n/a</u>
Brief description of filing. (If filing follows rarates and rules applicable for Commercial C	ates of an advisory organization, spec	
*Adjusted to reflect all prior rate changes. **Change in Company's premium level whicl	h will result from application of new rate	9 \$.
	Allied Prope	erty & Casualty Insurance Co
		Name of Company
	Marie Saf	reed, State Filing Specialist
		Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level	produced by rate revision effective	4-1-15
(1)	(2) Annual Premium	(3) Percent
<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Dr. (D. O. Constall		
3. Liability Other Than Auto		
4. Burglary and Theft	\$41,910	-11.0%
5. Glass		
7. Surety		
Boiler and Machinery Fire		
10. Extended Coverage 11. Inland Marine		
<u></u>		
	<u> </u>	
15. OtherLine of Insurance		
Line of modifiance		
Does filing only apply to certain territory (terri	tories) or certain classes? If so, specify:	n/a
cood iming only apply to dontain termony (term		
Brief description of filing. (If filing follows ra	tes of an advisory organization, specify	y organization): We are filing revised
ates and rules applicable for Commercial Cr		
Adjusted to reflect all prior rate changes.		
**Change in Company's premium level which	will result from application of new rates	
		de Mutual Insurance Co
	1	Name of Company
	Made Oafe	and Chata Filing Consistint
	iviarie Satre	ed, State Filing Specialist Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium	or rate level	produced	by rate	revision:
effective 09/01/2014				

	3,700,70	 '	
_	(1)	(2)	(3)
_		Annual Premium	Percent
	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
	Commercial		
2	Automobile Physical Damag		
	Private Passenger		<u> </u>
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft	1608	-8.5
5.	Glass		
6.	Fidelity	65759	2.5
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
•	Does filing only apply to certa Classes? If so,	in territory (territories) or	certain
	·	& Theft Fidelity	
	Brief description of filing. (If fi Organization, specify	ling follows rates of an a	dvisory
	organization):	ISO lost cost and rule cha	inge
		<u></u>	
	*Adjusted to reflect all prior ra **Change in Company's prem		It from application of new
	rates.	Sentry Insurance	a Mutual Company
		i	me of Company
		Mike Williams - VP	
			Official – Title
		•	Omoral - Filit

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois) *	Change (+or-) **
Automobile Liability Private		
Passenger		
Commercial		
Automobile Physical Damag		
Private Passenger		
Commercial		
iability Other Than Auto		
Burglary and Theft	19,283	3.9%
Glass		
idelity	218,838	33.8%
Surety		
Boiler and Machinery		
ire		
Extended Coverage		
nland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Othe <u>r</u>		
Line of Insurance		
Does filing only apply to certa	in territory (territories) or	certain
Classes? If so,		
specify:		
Brief description of filing. (If f	iling follows rates of an a	dvisory
Organization, specify		
aranization):	Adopts ISO loss costs and	d factors, applies new Sentry ru
,		
organization): Details are in filing memorandum.		
Details are in filing memorandum.	A	
*Adjusted to reflect all prior ra		It from application of r
,		
*Adjusted to reflect all prior ra	Sentry Select Insu	• •